## REMARKS

Entry of this Amendment and reconsideration are respectfully requested in view of the amendments made to the claims and for the remarks made herein. Claims 1-8, 10-12 and 17-22 are pending. Claims 1-8 and 10-12 have been rejected. Claims 17-22 have been added. No new matter has been added.

Claims 1-8, and 10-12 stand rejected under 35 USC 103(a) as being obvious over Coffman (USPPA 2006/053036). Claims 1-8 and 10-11 include the feature of "an erasing device that erases the identification code from a memory of the control device at a predetermined time independent of the location of the medical examination device." Claim 12 includes the step of "erasing the identification code from the memory of the control device at a predetermined time independent of the location of the medical examination device and the control device." The Office Action asserts that Coffman discloses this feature. Moreover, the Office Action asserts that the previous limitation of a "'predetermined time' may encompass an amount of time in which the criteria of Coffman is satisfactorily met." Applicant respectfully point out that Coffman does not disclose, and teaches away from, erasing the identification code at a predetermined time independent of the location of the medical examination device and the control device.

The Office Action asserts that support for Coffman teaching this feature may be found in paragraphs 65, 72, 100-104 and Figures 1 and 4. Applicant respectfully points out that the Coffman system, referring to step 300 of its FIG. 3, clears its memory based upon establishing the communication connection between the mobile medical transaction carrier (MTC) 110 and the control system 40:

[0072] Once the connection has been established in the box 300, the MTC 110 may be queried by the control system 40 to transmit unknown deleted transaction identifications (IDs) that were not found in the information stored in the PSA 120. The control server 40 analyzes the unknown deleted transaction IDs, and determines, in box 320, whether or not these transactions are pending or may be

cleared from memory. If the transactions associated with the undeleted transaction IDs are not pending, control server 40 determines, in box 330, that no action needs to be taken and that these transactions were cleared during a previous communication session. In the case where the determination in box 320 indicates that the unknown deleted transaction IDs are pending for clearance, the control server 40 marks the transaction as cleared 334. (Coffman par. 72)(emphasis added).

Coffman further describes the connection being established not based upon predetermined time periods, but rather based upon a particular location of the MTC 110:

[0069] Once at the nurse station computer system 60, the MTC 110 in inserted into computer system 60 or MTC cradle 100, depending on the configuration of the equipment, to begin the process of communicating the patient information gathered from the PSA 120 into the storage of control system 40. Alternatively, particularly in the case where a wireless system is used, MTC 110 may be activated as it approaches within a predetermined distance of the nurse station computer system 60 or another other device, such as a computer system located at a location other than at the nurse station 50 (not shown) or a remotely located transmitter/receiver configured to establish communication with a MTC, to establish a communication connection with control system 40 over communication system 5. (Coffman par. 69).

The distance-based clearing of the memory of the MTC 110 is consistent with the objective of Coffman of providing mobile MTCs 110, such as a nurse's PDA, that provide for tracking of the administration of medications for a specific patient:

[0015] Generally, the system of the present invention includes a medical transaction carrier ("MTC") that contains information concerning past and present medical transactions. The medical transaction carrier is used to transfer information relating to past and present medical transactions between a control system that is various interfaced with other care-giving institutional information systems, such as a pharmacy information system, or hospital information system, or physician order entry system, or a patient specific asset located at a patient's bedside. The information transferred by the medical transaction carrier is used to validate that the right medication and the parameters of the medication administration record are properly

**delivered to the right patient.** . The system of the present invention includes methods for validating the information transferred by the medical transaction system to ensure that no information is lost.

[0016] The medical transaction carrier in accordance with one aspect of the present invention may be a personal data assistant ("PDA"), a laptop computer, a smart card, a BLUETOOTH transceiver, or other device capable of storing information and transporting the information from one location in a care-giving facility where medications are prepared for delivery to a patient's bedside. In another aspect, the medical transaction carrier may be primarily stationary and located at the patient's bedside. At the patient's bedside, the medical transaction carrier is interfaced to a patient specific asset ("PSA"), such as an infusion pump or vital signs monitor, and the information stored within the medical transaction carrier is communicated to the patient specific asset to provide the asset with specific treatment parameters to be used in delivering medication to the patient or in otherwise interacting with the patient.

[0017] In another aspect of the present invention, the patient specific asset may include a capability of monitoring the progress of the delivery of medication and storing information relating to the delivery of the medication in a memory. The stored information may then be communicated to the medical transaction carrier for transport back to the control system, where the information is transferred from the medical transaction carrier and validated and/or documented by the control system. Documentation may occur in the pharmacy system for example. (Coffman paragraphs 15-17)(emphasis added).

Coffman teaches against an erasing device that erases the identification code from a memory of the control device at a predetermined time independent of the location of the medical examination device and the control device as in claims 1-8 and 10-11 or erasing the identification code from the memory of the control device at a predetermined time independent of the location of the medical examination device and the control device as in claim 12 since these are time-based erasures independent of the location of the device. Coffman is designed to ensure that all medical information is transferred to the control system and thus the Coffman system clears memories based on distance rather than imposing a pre-determined time period within which a clearance will occur.

Claims 17-22 depend from claims 1 and 12, respectively, and are also patentable over Coffman.

For all the foregoing reasons, it is respectfully submitted that all the present claims are patentable in view of the cited reference. A Notice of Allowance is respectfully requested.

Dated:

Andrew C. Gust

Registration No. 47,620

Respectfully submitted,

Akerman Senterfitt

for David Barnes, Reg. No. 47,407 Philips Electronics North America

Corporation

345 Scarborough Road

Briarcliff Manor, New York 10510

Telephone: 914-333-9693 Facsimile: 914-332-0615

File: NL020998US